

Bank of America
P.O. Box 2518
Houston, TX 77252-2518



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You're always on the go.

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- 24/7 Online Banking* with free bill payment service
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- More than 4,000 banking centers

For details, visit [**www.bankofamerica.com**](http://www.bankofamerica.com).

*Available for consumer and small business accounts.

95-16-2481NSB 06-2004



**Your Bank of America
Business Checking
Statement**

2436 P
E 0-3

Statement Period:
June 9 through July 7, 2005

Account Number: 24366-10636

At Your Service
Call: 818.994.8200

Written Inquiries
Bank of America
Glenoaks-Hubbard Branch
PO Box 37176
San Francisco, CA 94137-0001

Customer since 2004
Bank of America appreciates your
business and we enjoy serving you.



CENTAUR GIRL PRODUCTIONS, INC
11100-8 SEPULVEDA BLVD #512
MISSION HILS CA 91345-1101

Our free Online Banking service allows you to check balances, track account activity, pay bills and more. With Online Banking you can also view up to 18 months of this statement online. Enroll at www.bankofamerica.com/smallbusiness.

☐ **Summary of Your Business Checking Account**

| | |
|---|---------|
| Beginning Balance on 06/09/05 | \$70.44 |
| Total Checks, Withdrawals, Transfers, Account Fees | - 9.00 |
| Service Charge | - 12.00 |
| Ending Balance | \$49.44 |

| | |
|--|---|
| Number of 24 Hour Customer Service Calls | |
| Self-Service | 0 |
| Assisted | 0 |

☐ **Important Information About Your Account**

A monthly service charge was applied to your account because your balance was below the minimum balance of \$4,000 and the average balance of \$8,000. You can avoid this charge by linking other Bank of America savings plans and meeting the \$7,500 minimum combined balance or \$15,000 average combined balance requirements.

☐ **Bank of America News**

Have a conversation with ADP, and you may never have to have one with the IRS. Call 1.866.373.0087 for a free payroll consultation. Also receive 1 month free payroll processing plus no set-up fees when you sign up for payroll services by 8/31/2005. Make sure to mention Bank of America promotion code "Payroll 0705". Other terms and conditions may apply.

☐ **Account Activity**

| Date Posted | Description | Reference # | Debits | Credits | Daily Balance |
|-------------|---|-------------|---------|---------|---------------|
| 07/05 | Check Card Purchase on 07/04 (Card #330926437), 2co.Com*2checkout.Com 2checkout.Com OH Ref #24692165185000916039259 | | \$ 4.00 | | |

Continued on next page
0085016.001.T07

California

Page 1 of 3

CENTAUR GIRL PRODUCTIONS, INC

Statement Period: June 9 through July 7, 2005
Account Number: 24366-10636

How To Balance Your Bank of America Account

FIRST, start with your Account Register/Checkbook:

1. List your Account Register/Checkbook Balance here \$ _____
2. Subtract any service charges or other deductions not previously recorded that are listed on this statement \$ _____
3. Add any credits not previously recorded that are listed on this statement (for example interest) \$ _____
4. This is your NEW ACCOUNT REGISTER BALANCE \$ _____

NOW, with your Account Statement:

1. List your Statement Ending Balance here \$ _____
2. Add any deposits not shown on this statement \$ _____

SUBTOTAL

\$ _____

3. List and total all outstanding checks, ATM, Check Card and other electronic withdrawals

| Checks, ATM, Check Card, Electronic Withdrawals | | Checks, ATM, Check Card, Electronic Withdrawals | | Checks, ATM, Check Card, Electronic Withdrawals | |
|--|--------|--|--------|--|--------|
| Date/Check # | Amount | Date/Check # | Amount | Date/Check # | Amount |
| _____ | _____ | _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ | _____ | _____ |

4. TOTAL OF OUTSTANDING CHECKS, ATM, Check Card and other electronic withdrawals \$ _____
5. Subtract total outstanding checks, ATM, Check Card and other electronic withdrawals from Subtotal
This Balance should match your new Account Register Balance \$ _____

Upon receipt of your statement, differences, if any, should be reported to the bank promptly in writing and in accordance with provisions in your deposit agreement.

Important Information

Change of Address. Please call us at the telephone number listed on the front of this statement to tell us about a change of address.

Deposit Agreement. When you opened your account, you received a deposit agreement and fee schedule and agreed that your account would be governed by the terms of these documents, as we may amend them from time to time. These documents are part of the contract for your deposit account and govern all transactions relating to your account, including all deposits and withdrawals. Copies of both the deposit agreement and fee schedule, which contain the current version of the terms and conditions of your account relationship, may be obtained at our banking centers.

Electronic Transfers: In case of errors or questions about your electronic transfers

If you think your statement or receipt is wrong or if you need more information about an electronic transfer (e.g., ATM transactions, direct deposits or withdrawals, point-of-sale transactions) on the statement or receipt, telephone or write us at the address and number listed on the front of this statement as soon as you can. We must hear from you no later than 60 days after we sent you the FIRST statement on which the error or problem appeared.

- * Tell us your name and account number.
- * Describe the error or the transfer you are unsure about, and explain as clearly as you can why you believe there is an error or why you need more information.
- * Tell us the dollar amount of the suspected error.

For consumer accounts used primarily for personal, family or household purposes, we will investigate your complaint and will correct any error promptly. If we take more than 10 business days (20 business days if you are a new customer, for electronic transfers occurring during the first 30 days after the first deposit is made to your account) to do this, we will recredit your account for the amount you think is in error, so that you will have use of the money during the time it takes us to complete our investigation.

For other accounts, we investigate, and if we find we have made an error, we credit your account at the conclusion of our investigation.

Reporting Other Problems. You must examine your statement carefully and promptly. You are in the best position to discover errors and unauthorized transactions on your account. If you fail to notify us in writing of suspected problems or unauthorized transactions within the time periods specified in the deposit agreement (which periods are no more than 60 days after we make the statement available to you and in some cases are 30 days or less), we are not liable to you for, and you agree not to make a claim against us for the problems or unauthorized transactions.

Direct Deposits. If you have arranged to have direct deposits made to your account at least once every 60 days from the same person or company, you may call us at the telephone number listed on the front of this statement to find out if the deposit was made as scheduled.



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PLAN ADMINISTRATOR
6301 OWENSMOUTH AVE STE 700
WOODLAND HILLS CA 91367-9663



Affordable term life insurance for Bank of America customers.

Banc of America Insurance Services, Inc. is pleased to provide information on affordable term life insurance. Here are examples of the rates available for a 10-year plan. Insurance issued by AMERICAN GENERAL LIFE INSURANCE COMPANY. For more information without obligation, visit www.bankofamerica.com/insurance, complete and mail this postage-paid card today or call our Plan Administrator toll-free at 1.800.585.9770.

| 10-YEAR GUARANTEED MONTHLY RATE | | | | | | | | | | | | | | | | |
|---------------------------------|-----------|-------|--------|-------|--------|-------|--------|-------|--------|-------|--------|-------|--------|--------|--------|--------|
| Insurance Amount | Age 20-30 | | Age 35 | | Age 40 | | Age 45 | | Age 50 | | Age 55 | | Age 60 | | Age 65 | |
| | Female | Male | Female | Male | Female | Male | Female | Male | Female | Male | Female | Male | Female | Male | Female | Male |
| \$100,000 | 9.63 | 10.24 | 9.71 | 10.59 | 10.68 | 11.73 | 13.04 | 14.96 | 15.93 | 19.51 | 20.83 | 27.21 | 28.61 | 42.88 | 41.04 | 67.46 |
| \$250,000 | 9.41 | 10.50 | 9.41 | 10.50 | 11.38 | 12.69 | 16.41 | 19.25 | 21.88 | 28.44 | 31.72 | 44.19 | 47.03 | 71.09 | 71.53 | 116.16 |
| \$500,000 | 13.56 | 15.75 | 13.56 | 15.75 | 17.50 | 20.13 | 27.56 | 33.25 | 38.50 | 51.63 | 58.19 | 83.13 | 88.81 | 136.94 | 137.81 | 227.06 |

Monthly Premiums for Preferred Plus, Non-Tobacco Rates. Premiums for other face amounts, other term lengths (15, 20, and 30 years) and other ages up to age 80 (70 in Washington state) are available.

Name _____ Amount of Insurance Desired \$ _____ Address _____ City _____
State _____ Zip _____ Day Phone (_____) _____ Evening Phone (_____) _____ Male Age _____ Female Age _____

LTG Ultra 10 (policy Form Number LTG-2000AG) and LTG Ultra-C 10 (Policy Form Number LTG-C 01AG) are term life insurance policies with guaranteed level premiums for 10 years (form not available in all states). Illustrated monthly premiums shown are for male and female, Preferred Plus, Non-Tobacco Class I. LTG Ultra 10 is shown for \$250,000 and \$500,000 face amounts; LTG Ultra-C 10 is shown for \$100,000 face amount. Premium will depend on each applicant's evidence of insurability. All applications are medically underwritten. Insurance issued by AMERICAN GENERAL LIFE INSURANCE COMPANY member of American International Group, Inc., Houston, Texas. American General Life is responsible for the underwriting risks, financial obligations and support functions. At the end of the guaranteed term premiums increase if policy is renewed. Premiums for other rate classes, ages and payment plans are available upon request. Death benefit remains level and is payable in lump sum or installments, if so elected. The insurance company may contest the policy for two years from date of policy issue for material misstatements or omissions on the application. Death benefit payable from any cause except suicide within the first two policy years. In the event of suicide in the first two years, policy benefit is limited to return of premium paid. American General Life Insurance Company is solely responsible for its own financial condition and contractual obligations. American General Life does not solicit in the state of New York.

NOT A DEPOSIT NOT FDIC INSURED NOT GUARANTEED BY THE BANK NOT INSURED BY ANY FEDERAL GOVERNMENT AGENCY

Bank of America



Higher Standards

Bank of America
P.O. Box 2518
Houston, TX 77252-2518

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Who says time isn't on your side?



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95-16-2481NSB 06-2004

2436 P
E 0-3

Your Bank of America Business Checking Statement

Statement Period:
July 8 through August 9, 2005

Account Number: 24366-10636



CENTAUR GIRL PRODUCTIONS, INC
11100-8 SEPULVEDA BLVD #512
MISSION HILLS CA 91345-1101

At Your Service
Call: 818.994.8200

Written Inquiries
Bank of America
Glenoaks-Hubbard Branch
PO Box 37176
San Francisco, CA 94137-0001

Customer since 2004
Bank of America appreciates your
business and we enjoy serving you.

Our free Online Banking service allows you to check balances, track account activity, pay bills and more. **With Online Banking** you can also view up to 18 months of this statement online. Enroll at www.bankofamerica.com/smallbusiness.

☐ **Summary of Your Business Checking Account**

| | |
|---|----------|
| Beginning Balance on 07/08/05 | \$49.44 |
| Total Deposits and Credits | + 100.00 |
| Total Checks, Withdrawals, Transfers, Account Fees | - 53.53 |
| Service Charge | - 12.00 |
| Ending Balance | \$83.91 |

| | |
|--|---|
| Number of 24 Hour Customer Service Calls | |
| Self-Service | 0 |
| Assisted | 0 |

☐ **Important Information About Your Account**

A monthly service charge was applied to your account because your balance was below the minimum balance of \$4,000 and the average balance of \$8,000. You can avoid this charge by linking other Bank of America savings plans and meeting the \$7,500 minimum combined balance or \$15,000 average combined balance requirements.

☐ **Bank of America News**

The Bank of America Business Debit Card provides more than an easy way to pay for everyday expenses, it can help you keep track of them too. All debit card purchases are directly deducted from your business checking account and neatly itemized on your monthly statements. You'll see details for all of your transactions, so monitoring expenses is easy.

CENTAUR GIRL PRODUCTIONS, INC

Statement Period: July 8 through August 9, 2005
Account Number: 24366-10636☐ Account Activity

| Date Posted | Description | Reference # | Debits | Credits | Daily Balance |
|-------------|---|-------------|----------|-----------|---------------|
| 07/25 | ATM deposit on 07/25, Bank of America ATM #SCAD1835 (Card #330926437) | 004785 | | \$ 100.00 | \$149.44 |
| 07/26 | Check Card Purchase on 07/24 (Card #330926437), Go Daddy.Com 480-505-8855 AZ Ref #24266965206980000868206 | | \$ 44.53 | | \$104.91 |
| 08/03 | Check Card Purchase on 08/01 (Card #330926437), Totalchoice Hosting 248-6281206 MI Ref #24721875215021402747521 | | \$ 5.00 | | \$99.91 |
| 08/05 | Check Card Purchase on 08/04 (Card #330926437), 2co.Com*2checkout.Com 2checkout.Com OH Ref #24692165216000397986427 | | \$ 4.00 | | \$95.91 |
| 08/09 | Monthly Service Charge | | \$ 12.00 | | \$83.91 |

☐ Bank of America: In Balance

To assist you in reconciling your account, we have provided the following summary information.
A reconciliation worksheet is printed on the reverse of this page.

- Your ending balance from this statement\$83.91
- Subtract the monthly service charge from your checkbook register..... 12.00

☐ ATM Information

This period, you visited the following ATM locations:

Bank of America's ATM Network

- #SCAD1835 Bank Of America, Sylmar, CA

CENTAUR GIRL PRODUCTIONS, INC

Statement Period: July 8 through August 9, 2005
Account Number: 24366-10636

How To Balance Your Bank of America Account

FIRST, start with your Account Register/Checkbook:

1. List your Account Register/Checkbook Balance here \$ _____
2. Subtract any service charges or other deductions not previously recorded that are listed on this statement \$ _____
3. Add any credits not previously recorded that are listed on this statement (for example interest) \$ _____
4. This is your NEW ACCOUNT REGISTER BALANCE \$ _____

NOW, with your Account Statement:

1. List your Statement Ending Balance here \$ _____
2. Add any deposits not shown on this statement \$ _____

SUBTOTAL

3. List and total all outstanding checks, ATM, Check Card and other electronic withdrawals \$ _____

| Checks, ATM, Check Card, Electronic Withdrawals | | Checks, ATM, Check Card, Electronic Withdrawals | | Checks, ATM, Check Card, Electronic Withdrawals | |
|--|--------|--|--------|--|--------|
| Date/Check # | Amount | Date/Check # | Amount | Date/Check # | Amount |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |

4. TOTAL OF OUTSTANDING CHECKS, ATM, Check Card and other electronic withdrawals \$ _____
5. Subtract total outstanding checks, ATM, Check Card and other electronic withdrawals from Subtotal
This Balance should match your new Account Register Balance \$ _____

Upon receipt of your statement, differences, if any, should be reported to the bank promptly in writing and in accordance with provisions in your deposit agreement.

Important Information

Change of Address. Please call us at the telephone number listed on the front of this statement to tell us about a change of address.

Deposit Agreement. When you opened your account, you received a deposit agreement and fee schedule and agreed that your account would be governed by the terms of these documents, as we may amend them from time to time. These documents are part of the contract for your deposit account and govern all transactions relating to your account, including all deposits and withdrawals. Copies of both the deposit agreement and fee schedule, which contain the current version of the terms and conditions of your account relationship, may be obtained at our banking centers.

Electronic Transfers: In case of errors or questions about your electronic transfers

If you think your statement or receipt is wrong or if you need more information about an electronic transfer (e.g., ATM transactions, direct deposits or withdrawals, point-of-sale transactions) on the statement or receipt, telephone or write us at the address and number listed on the front of this statement as soon as you can. We must hear from you no later than 60 days after we sent you the FIRST statement on which the error or problem appeared.

- * Tell us your name and account number.
- * Describe the error or the transfer you are unsure about, and explain as clearly as you can why you believe there is an error or why you need more information.
- * Tell us the dollar amount of the suspected error.

For consumer accounts used primarily for personal, family or household purposes, we will investigate your complaint and will correct any error promptly. If we take more than 10 business days (20 business days if you are a new customer, for electronic transfers occurring during the first 30 days after the first deposit is made to your account) to do this, we will recredit your account for the amount you think is in error, so that you will have use of the money during the time it takes us to complete our investigation.

For other accounts, we investigate, and if we find we have made an error, we credit your account at the conclusion of our investigation.

Reporting Other Problems. You must examine your statement carefully and promptly. You are in the best position to discover errors and unauthorized transactions on your account. If you fail to notify us in writing of suspected problems or unauthorized transactions within the time periods specified in the deposit agreement (which periods are no more than 60 days after we make the statement available to you and in some cases are 30 days or less), we are not liable to you for, and you agree not to make a claim against us for the problems or unauthorized transactions.

Direct Deposits. If you have arranged to have direct deposits made to your account at least once every 60 days from the same person or company, you may call us at the telephone number listed on the front of this statement to find out if the deposit was made as scheduled.



Use your Debit Card for non-PIN purchases - or use
Online Banking to pay bills or receive statements online -
and you could WIN!

**Win with Bank of America
\$1,000,000 in prizes!**

Bank of America  Higher Standards

Bank of America Insurance Services, Inc.

A Nonbank Subsidiary

Bank of America  Higher Standards

Affordable term life insurance for Bank of America customers.

Bank of America Insurance Services, Inc. is pleased to provide information on affordable term life insurance. Here are examples of the rates available for a 10-year plan. Insurance issued by **AMERICAN GENERAL LIFE INSURANCE COMPANY**. For more information without obligation, visit www.bankofamerica.com/insurance, complete and mail this postage-paid card today or call our Plan Administrator toll-free at 1.800.585.9770.

| Insurance Amount | Age 20-30 | | Age 35 | | Age 40 | | Age 45 | | Age 50 | | Age 55 | | Age 60 | | Age 65 | |
|------------------|-----------|-------|--------|-------|--------|-------|--------|-------|--------|-------|--------|-------|--------|--------|--------|--------|
| | Female | Male | Female | Male | Female | Male | Female | Male | Female | Male | Female | Male | Female | Male | Female | Male |
| \$100,000 | 9.63 | 10.24 | 9.71 | 10.59 | 10.68 | 11.73 | 13.04 | 14.96 | 15.93 | 19.51 | 20.83 | 27.21 | 28.61 | 42.88 | 41.04 | 67.46 |
| \$250,000 | 9.41 | 10.50 | 9.41 | 10.50 | 11.38 | 12.69 | 16.41 | 19.25 | 21.88 | 28.44 | 31.72 | 44.19 | 47.03 | 71.09 | 71.53 | 116.16 |
| \$500,000 | 13.56 | 15.75 | 13.56 | 15.75 | 17.50 | 20.13 | 27.56 | 33.25 | 38.50 | 51.63 | 58.19 | 83.13 | 88.81 | 136.94 | 137.81 | 227.06 |

Monthly Premiums for Preferred Plus, Non-Tobacco Rates. Premiums for other face amounts, other term lengths (15, 20, and 30 years) and other ages up to age 80 (70 in Washington state) are available.

Name _____ Amount of Insurance Desired \$ _____ Address _____ City _____
State _____ Zip _____ Day Phone () _____ Evening Phone () _____ Male Age _____ Female Age _____

LTG Ultra 10 (policy Form Number LTG-2000AG) and LTG Ultra-C 10 (Policy Form Number LTG-C 01AG) are term life insurance policies with guaranteed level premiums for 10 years (form not available in all states). Illustrated monthly premiums shown are for male and female, Preferred Plus, Non-Tobacco Class I. LTG Ultra 10 is shown for \$250,000 and \$500,000 face amounts; LTG Ultra-C 10 is shown for \$100,000 face amount. Premium will depend on each applicant's evidence of insurability. All applications are medically underwritten. Insurance issued by AMERICAN GENERAL LIFE INSURANCE COMPANY member of American International Group, Inc., Houston, Texas. American General Life is responsible for the underwriting risks, financial obligations and support functions. At the end of the guaranteed term premiums increase if policy is renewed. Premiums for other rate classes, ages and payment plans are available upon request. Death benefit remains level and is payable in lump sum or installments, if so elected. The insurance company may contest the policy for two years from date of policy issue for material misstatements or omissions on the application. Death benefit payable from any cause except suicide within the first two policy years. In the event of suicide in the first two years, policy benefit is limited to return of premium paid. American General Life Insurance Company is solely responsible for its own financial condition and contractual obligations. American General Life does not solicit in the state of New York.

☐ NOT A DEPOSIT ☐ NOT FDIC INSURED ☐ NOT GUARANTEED BY THE BANK ☐ NOT INSURED BY ANY FEDERAL GOVERNMENT AGENCY

Rev 4.05 ©



Win with Bank of America \$1,000,000 in prizes!

Use your Debit Card for non-PIN purchases – or use Online Banking to pay bills or receive statements online – and you could win!

You're always a winner with Bank of America – and now, you can win even more! From 7/11/05 through 9/30/05 when you use your Visa® Debit Card or Online Banking – you can win one of 10 prizes worth \$100,000 each.

That's a total of \$1,000,000 in prizes!

Visit www.bankofamerica.com/sweeps for complete details.

Bank of America, N.A. Member FDIC. © 2005 Bank of America Corporation.
No Purchase or Obligation Necessary. See official sweepstakes rules for details on how to enter without purchase or obligation. Must be 18 years of age or older to enter. Sweepstakes open to legal residents of the United States except in Puerto Rico, Guam, Virgin Islands and wherever else prohibited. Online Statements not available in WA and ID, and not available in CT, ME, MA, NH, NJ, NY, PA, RI until 7/25/05.

How to enter:

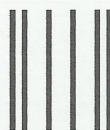
- **In places without a keypad** – like restaurants and video stores – just present your Debit Card and sign the receipt. Phone and mail order purchases count for entries, too.
- **In places with a keypad** – like grocery stores, gas stations and drugstores – simply swipe your Debit Card, select "Credit" and sign your receipt.
- **With Online Banking** – you'll receive one entry for every bill you pay (up to 10 per calendar month). Plus, you can also get an entry for receiving your statement online.

00470341



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00470028



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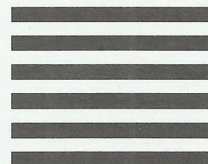
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PLAN ADMINISTRATOR
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WOODLAND HILLS CA 91367-9663



Bank of America
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Houston, TX 77252-2518



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Your Bank of America Business Checking Statement

2436 P
E 0-3

Statement Period:
August 10 through September 8, 2005

Account Number: 24366-10636



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11100-8 SEPULVEDA BLVD #512
MISSION HILLS CA 91345-1101

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Call: 818.994.8200

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Our free Online Banking service allows you to check balances, track account activity, pay bills and more. With Online Banking you can also view up to 18 months of this statement online. Enroll at www.bankofamerica.com/smallbusiness.

☐ **Summary of Your Business Checking Account**

| | | | |
|---|---------|--|---|
| Beginning Balance on 08/10/05 | \$83.91 | Number of ATM withdrawals and transfers | 1 |
| Total Checks, Withdrawals, Transfers, Account Fees | - 68.89 | Number of 24 Hour Customer Service Calls | |
| Service Charge | - 12.00 | Self-Service | 0 |
| Ending Balance | \$3.02 | Assisted | 0 |

☐ **Important Information About Your Account**

A monthly service charge was applied to your account because your balance was below the minimum balance of \$4,000 and the average balance of \$8,000. You can avoid this charge by linking other Bank of America savings plans and meeting the \$7,500 minimum combined balance or \$15,000 average combined balance requirements.

☐ **Bank of America News**

Did you know that you can open a Certificate of Deposit (CD) for as little as \$1,000? CDs are a safe, secure way to invest your money. Whether you're saving for that special purchase, a dream vacation, or want to complement your retirement, we have the solution for you. To find out more, visit your local banking center or call the number on this statement.

☐ **Account Activity**

| Date Posted | Description | Reference # | Debits | Credits | Daily Balance |
|-------------|---|-------------|----------|---------|---------------|
| 08/22 | Cash withdrawal on 08/20, Bank of America ATM #SCAD7438 (Card #330926437) | 008354 | \$ 20.00 | | |
| 08/22 | Check Card Purchase on 08/21 (Card #330926437), Pacific Theatre-152042 Northridge CA Ref #24492795233118000160597 | | 7.75 | | |

Continued on next page
0086523.001.T07

California

Page 1 of 3

CENTAUR GIRL PRODUCTIONS, INC

Statement Period: August 10 through September 8, 2005
Account Number: 24366-10636☐ **Account Activity** Continued

| Date Posted | Description | Reference # | Debits | Credits | Daily Balance |
|-------------|---|-------------|----------|---------|---------------|
| | | | | | \$56.16 |
| 08/24 | Check Card Purchase on 08/22 (Card #330926437), Totalchoice Hosting 248-6281206 MI Ref #24721875236023502908834 | | \$ 5.29 | | \$50.87 |
| 08/26 | Check Card Purchase on 08/25 (Card #330926437), Routhost.Com 919-413-1455 NC Ref #24765015238000946238679 | | \$ 5.95 | | |
| 08/26 | Check Card Purchase on 08/25 (Card #330926437), Frederico Miranda 818-241-2259 CA Ref #24492155237820907156031 | | 24.90 | | \$20.02 |
| 09/06 | Check Card Purchase on 09/02 (Card #330926437), Totalchoice Hosting 248-6281206 MI Ref #24721875249024603432950 | | \$ 5.00 | | \$15.02 |
| 09/08 | Monthly Service Charge | | \$ 12.00 | | \$3.02 |

☐ **Bank of America: In Balance**

To assist you in reconciling your account, we have provided the following summary information.
A reconciliation worksheet is printed on the reverse of this page.

- Your ending balance from this statement.....\$3.02
- Subtract the monthly service charge from your checkbook register.....12.00

☐ **ATM Information**

This period, you visited the following ATM locations:

Bank of America's ATM Network

- #SCAD7438 Bank Of America, Northridge, CA

☐ **FACTS - FDIC Insured Account Disclosure Information**

Bank of America wants you to know that for transactions posting to your account on or after November 18, 2005, you will be charged an International Transaction Fee when you use your Check Card or ATM Card for foreign purchases or ATM cash withdrawals in currency other than U.S. dollars. The International Transaction Fee will be 3% of the U.S. dollar amount for each converted purchase or 1% of the U.S. dollar amount for each converted ATM cash withdrawal. This International Transaction Fee will appear as a separate item on your banking statement for each international transaction.

Statement Period: August 10 through September 8, 2005
Account Number: 24366-10636

100

- 100

Affordable term life insurance for Bank of America customers.

Banc of America Insurance Services, Inc. is pleased to provide information on affordable term life insurance. Here are examples of the rates available for a 10-year plan. Insurance issued by AMERICAN GENERAL LIFE INSURANCE COMPANY. For more information without obligation, visit www.bankofamerica.com/insurance, complete and mail this postage-paid card today or call our Plan Administrator toll-free at 1.800.585.9770.

| 10-YEAR GUARANTEED MONTHLY RATE | | | | | | | | | | | | | | | | |
|---------------------------------|-----------|-------|--------|-------|--------|-------|--------|-------|--------|-------|--------|-------|--------|--------|--------|--------|
| Insurance Amount | Age 20-30 | | Age 35 | | Age 40 | | Age 45 | | Age 50 | | Age 55 | | Age 60 | | Age 65 | |
| | Female | Male | Female | Male | Female | Male | Female | Male | Female | Male | Female | Male | Female | Male | Female | Male |
| \$100,000 | 9.63 | 10.24 | 9.71 | 10.59 | 10.68 | 11.73 | 13.04 | 14.96 | 15.93 | 19.51 | 20.83 | 27.21 | 28.61 | 42.88 | 41.04 | 67.46 |
| \$250,000 | 9.19 | 10.28 | 9.41 | 10.28 | 11.59 | 13.13 | 15.97 | 19.25 | 21.66 | 29.53 | 31.28 | 43.75 | 45.06 | 70.44 | 70.44 | 115.94 |
| \$500,000 | 14.00 | 16.19 | 14.44 | 16.19 | 18.81 | 21.88 | 27.56 | 34.13 | 38.94 | 54.69 | 58.19 | 83.13 | 85.75 | 136.50 | 136.50 | 227.50 |

Monthly Premiums for Preferred Plus, Non-Tobacco Rates. Premiums for other face amounts, other term lengths (15, 20, and 30 years) and other ages up to age 80 (70 in Washington state) are available.

Name _____ Amount of Insurance Desired \$ _____ Address _____ City _____

State _____ Zip _____ Day Phone (_____) _____ Evening Phone (_____) _____ Male Age _____ Female Age _____

LTG Ultra 10 (policy Form Number LTG-2000AG) and LTG Ultra-C 10 (Policy Form Number LTG-C 01AG) are term life insurance policies with guaranteed level premiums for 10 years (form not available in all states). Illustrated monthly premiums shown are for male and female, Preferred Plus, Non-Tobacco Class I. LTG Ultra 10 is shown for \$250,000 and \$500,000 face amounts; LTG Ultra-C 10 is shown for \$100,000 face amount. Premium will depend on each applicant's evidence of insurability. All applications are medically underwritten. Insurance issued by AMERICAN GENERAL LIFE INSURANCE COMPANY member of American International Group, Inc., Houston, Texas. American General Life is responsible for the underwriting risks, financial obligations and support functions. At the end of the guaranteed term premiums increase if policy is renewed. Premiums for other rate classes, ages and payment plans are available upon request. Death benefit remains level and is payable in lump sum or installments, if so elected. The insurance company may contest the policy for two years from date of policy issue for material misstatements or omissions on the application. Death benefit payable from any cause except suicide within the first two policy years. In the event of suicide in the first two years, policy benefit is limited to return of premium paid. American General Life Insurance Company is solely responsible for its own financial condition and contractual obligations. American General Life does not solicit in the state of New York. AR Residents: Banc of America Insurance Services, Inc. and BA Insurance Services, Inc. represent the insurance company in any insurance sale and are paid commission and may receive other performance based compensation from the insurance company for the services they provide to the customer on behalf of the insurance company.

Insurance Products are: NOT A DEPOSIT NOT FDIC INSURED NOT GUARANTEED BY THE BANK NOT INSURED BY ANY FEDERAL GOVERNMENT AGENCY

00470028



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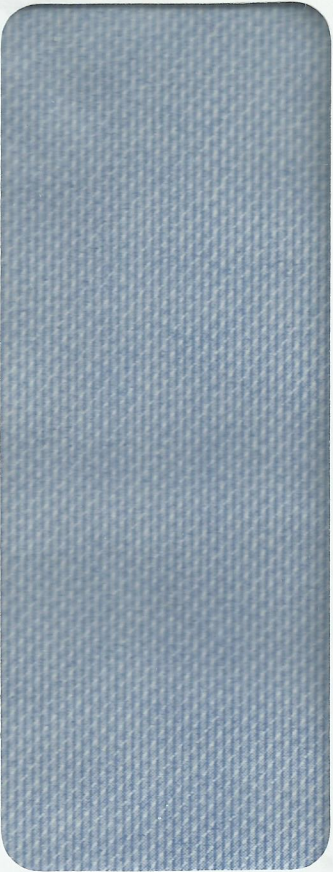
BANC OF AMERICA INSURANCE SERVICES INC
PLAN ADMINISTRATOR
6301 OWENSMOUTH AVE STE 700
WOODLAND HILLS CA 91367-9663



Bank of America



Bank of America
P.O. Box 2518, Houston, TX 77252-2518



PRESORTED
FIRST CLASS



00-17-9593NSB 08-2005

Your Bank of America Business Checking Statement

2436 P
E 0-3

Statement Period:
September 9 through October 6, 2005

Account Number: 24366-10636

|||||
CENTAUR GIRL PRODUCTIONS, INC
11100-8 SEPULVEDA BLVD #512
MISSION HILS CA 91345-1101

At Your Service
Call: 818.994.8200

Written Inquiries
Bank of America
Glenoaks-Hubbard Branch
PO Box 37176
San Francisco, CA 94137-0001

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Bank of America appreciates your
business and we enjoy serving you.

Our free Online Banking service allows you to check balances, track account activity, pay bills and more. With Online Banking you can also view up to 18 months of this statement online. Enroll at www.bankofamerica.com/smallbusiness.

☐ **Summary of Your Business Checking Account**

| | |
|---|----------|
| Beginning Balance on 09/09/05 | \$3.02 |
| Total Deposits and Credits | + 100.00 |
| Total Checks, Withdrawals, Transfers, Account Fees | - 29.95 |
| Service Charge | - 12.00 |
| Ending Balance | \$61.07 |

| | |
|--|---|
| Number of 24 Hour Customer Service Calls | |
| Self-Service | 0 |
| Assisted | 0 |

☐ **Important Information About Your Account**

A monthly service charge was applied to your account because your balance was below the minimum balance of \$4,000 and the average balance of \$8,000. You can avoid this charge by linking other Bank of America savings plans and meeting the \$7,500 minimum combined balance or \$15,000 average combined balance requirements.

Effective November 1, 2005, users of Bank of America Business Deposit Cards will no longer be able to obtain balance information at the ATM for linked checking, savings or money market accounts.

☐ **Account Activity**

| Date Posted | Description | Reference # | Debits | Credits | Daily Balance |
|-------------|---|-------------|----------|-----------|---------------|
| 09/27 | Check Card Purchase on 09/26 (Card #330926437), Routhost.Com 919-413-1455 NC Ref #24765015270206000048651 | | \$ 5.95 | | - \$2.93 |
| 09/28 | Insufficient Funds Fee | | \$ 19.00 | | - \$21.93 |
| 10/03 | ATM deposit on 10/03, Bank of America ATM #SCAD1835 (Card #330926437) | 007384 | | \$ 100.00 | |

Continued on next page
0087041.001.T07

California

Page 1 of 3

CENTAUR GIRL PRODUCTIONS, INC

Statement Period: September 9 through October 6, 2005
Account Number: 24366-10636☐ **Account Activity** Continued

| Date Posted | Description | Reference # | Debits | Credits | Daily Balance |
|-------------|---|-------------|----------|---------|---------------|
| 10/04 | Check Card Purchase on 10/01 (Card #330926437), Totalchoice Hosting 248-6281206 MI Ref #24721875277027602825004 | | \$ 5.00 | | \$78.07 |
| 10/06 | Monthly Service Charge | | \$ 12.00 | | \$73.07 |
| | | | | | \$61.07 |

☐ **Bank of America: In Balance**

To assist you in reconciling your account, we have provided the following summary information.
A reconciliation worksheet is printed on the reverse of this page.

- Your ending balance from this statement.....\$61.07
- Subtract insufficient funds fees from your checkbook register 19.00
- Subtract the monthly service charge from your checkbook register..... 12.00

☐ **ATM Information**

This period, you visited the following ATM locations:

Bank of America's ATM Network

- #SCAD1835 Bank Of America, Sylmar, CA

☐ **FACTS - FDIC Insured Account Disclosure Information**

If a merchant or financial institution requests pre-authorization for a debit card transaction, we may place a hold on your account for the pre-authorized amount. The hold will reduce the balance available for debit card authorizations. The hold will not affect other withdrawals such as checks, electronic transfers or previously authorized debit card transactions. The hold will not prevent the pre-authorized transaction from overdrawing your account if funds are not available when the actual transaction is posted. We will remove a hold from your account when the actual transaction amount is debited or up to three business days after the pre-authorization request, whichever occurs sooner.

CENTAUR GIRL PRODUCTIONS, INC

Statement Period: September 9 through October 6, 2005
Account Number: 24366-10636

How To Balance Your Bank of America Account

FIRST, start with your Account Register/Checkbook:

1. List your Account Register/Checkbook Balance here \$ _____
2. Subtract any service charges or other deductions not previously recorded that are listed on this statement \$ _____
3. Add any credits not previously recorded that are listed on this statement (for example interest) \$ _____
4. This is your NEW ACCOUNT REGISTER BALANCE \$ _____

NOW, with your Account Statement:

1. List your Statement Ending Balance here \$ _____
2. Add any deposits not shown on this statement \$ _____

SUBTOTAL

3. List and total all outstanding checks, ATM, Check Card and other electronic withdrawals

| Checks, ATM, Check Card, Electronic Withdrawals | | Checks, ATM, Check Card, Electronic Withdrawals | | Checks, ATM, Check Card, Electronic Withdrawals | |
|--|--------|--|--------|--|--------|
| Date/Check # | Amount | Date/Check # | Amount | Date/Check # | Amount |
| _____ | _____ | _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ | _____ | _____ |

4. TOTAL OF OUTSTANDING CHECKS, ATM, Check Card and other electronic withdrawals \$ _____
5. Subtract total outstanding checks, ATM, Check Card and other electronic withdrawals from Subtotal
This Balance should match your new Account Register Balance \$ _____

Upon receipt of your statement, differences, if any, should be reported to the bank promptly in writing and in accordance with provisions in your deposit agreement.

Important Information

Change of Address. Please call us at the telephone number listed on the front of this statement to tell us about a change of address.

Deposit Agreement. When you opened your account, you received a deposit agreement and fee schedule and agreed that your account would be governed by the terms of these documents, as we may amend them from time to time. These documents are part of the contract for your deposit account and govern all transactions relating to your account, including all deposits and withdrawals. Copies of both the deposit agreement and fee schedule, which contain the current version of the terms and conditions of your account relationship, may be obtained at our banking centers.

Electronic Transfers: In case of errors or questions about your electronic transfers

If you think your statement or receipt is wrong or if you need more information about an electronic transfer (e.g., ATM transactions, direct deposits or withdrawals, point-of-sale transactions) on the statement or receipt, telephone or write us at the address and number listed on the front of this statement as soon as you can. We must hear from you no later than 60 days after we sent you the FIRST statement on which the error or problem appeared.

- * Tell us your name and account number.
- * Describe the error or the transfer you are unsure about, and explain as clearly as you can why you believe there is an error or why you need more information.
- * Tell us the dollar amount of the suspected error.

For consumer accounts used primarily for personal, family or household purposes, we will investigate your complaint and will correct any error promptly. If we take more than 10 business days (20 business days if you are a new customer, for electronic transfers occurring during the first 30 days after the first deposit is made to your account) to do this, we will recredit your account for the amount you think is in error, so that you will have use of the money during the time it takes us to complete our investigation.

For other accounts, we investigate, and if we find we have made an error, we credit your account at the conclusion of our investigation.

Reporting Other Problems. You must examine your statement carefully and promptly. You are in the best position to discover errors and unauthorized transactions on your account. If you fail to notify us in writing of suspected problems or unauthorized transactions within the time periods specified in the deposit agreement (which periods are no more than 60 days after we make the statement available to you and in some cases are 30 days or less), we are not liable to you for, and you agree not to make a claim against us for the problems or unauthorized transactions.

Direct Deposits. If you have arranged to have direct deposits made to your account at least once every 60 days from the same person or company, you may call us at the telephone number listed on the front of this statement to find out if the deposit was made as scheduled.



3 easy ways to apply or get more information:

- ① Visit www.bankofamerica.com/termlife2
- ② Call our Plan Administrator toll-free at **1.888.836.3445**
- ③ Complete and mail this postage-paid card today

| 10-YEAR GUARANTEED MONTHLY RATE | | | | | | | | | | | | | | | | |
|---------------------------------|-----------|-------|--------|-------|--------|-------|--------|-------|--------|-------|--------|-------|--------|--------|--------|--------|
| Insurance Amount | Age 20-30 | | Age 35 | | Age 40 | | Age 45 | | Age 50 | | Age 55 | | Age 60 | | Age 65 | |
| | Female | Male | Female | Male | Female | Male | Female | Male | Female | Male | Female | Male | Female | Male | Female | Male |
| \$100,000 | 9.63 | 10.24 | 9.71 | 10.59 | 10.68 | 11.73 | 13.04 | 14.96 | 15.93 | 19.51 | 20.83 | 27.21 | 28.61 | 42.88 | 41.04 | 67.46 |
| \$250,000 | 9.19 | 10.28 | 9.41 | 10.28 | 11.59 | 13.13 | 15.97 | 19.25 | 21.66 | 29.53 | 31.28 | 43.75 | 45.06 | 70.44 | 70.44 | 115.94 |
| \$500,000 | 14.00 | 16.19 | 14.44 | 16.19 | 18.81 | 21.88 | 27.56 | 34.13 | 38.94 | 54.69 | 58.19 | 83.13 | 85.75 | 136.50 | 136.50 | 227.54 |

Monthly Premiums for Preferred Plus, Non-Tobacco Rates. Premiums for other face amounts, other term lengths (15, 20, and 30 years) and other ages up to age 80 (70 in Washington state) are available.

| | | | |
|------------|--------------------------------------|---------------|------------|
| Name _____ | Amount of Insurance Desired \$ _____ | Address _____ | City _____ |
|------------|--------------------------------------|---------------|------------|

State _____ Zip _____ Day Phone () _____ Evening Phone () _____ Male Age _____ Female Age _____

LTG Ultra 10 (policy Form Number LTG-2000AG) and LTG Ultra-C 10 (Policy Form Number LTG-C 01AG) are term life insurance policies with guaranteed level premiums for 10 years (form not available in all states). Illustrative monthly premiums shown are for male and female, Preferred Plus, Non-Tobacco Class I. LTG Ultra 10 is shown for \$250,000 and \$500,000 face amounts; LTG Ultra-C 10 is shown for \$100,000 face amount. Premium will depend on each applicant's evidence of insurability. All applications are medically underwritten. Insurance issued by AMERICAN GENERAL LIFE INSURANCE COMPANY member of American International Group, Inc., Houston, Texas. American General Life is responsible for the underwriting risks, financial obligations and support functions. At the end of the guaranteed term premiums increase if policy is renewed. Premiums for other rate classes, ages and payment plans are available upon request. Death benefit remains level and is payable in lump sum or installments, if so elected. The insurance company may contest the policy for two years from date of policy issue for material misstatements or omissions on the application. Death benefit payable from any cause except suicide within the first two policy years. In the event of suicide in the first two years, policy benefit is limited to return of premium paid. American General Life Insurance Company is solely responsible for its own financial condition and contractual obligations. American General Life does not solicit in the state of New York. AR Residents: Banc of America Insurance Services, Inc. and BA Insurance Services, Inc. represent the insurance company in any insurance sale and are paid commission and may receive other performance based compensation from the insurance company for the services they provide to the customer on behalf of the insurance company.

| | | | | |
|-------------------------|---------------|------------------|----------------------------|--|
| Insurance Products are: | NOT A DEPOSIT | NOT FDIC INSURED | NOT GUARANTEED BY THE BANK | NOT INSURED BY ANY FEDERAL GOVERNMENT AGENCY |
|-------------------------|---------------|------------------|----------------------------|--|

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601



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PLAN ADMINISTRATOR
6301 OWENSMOUTH AVE STE 700
WOODLAND HILLS CA 91367-9663

